Exhibit 300: Capital Asset Summary

Part I: Summary Information And Justification (All Capital Assets)

Section A: Overview & Summary Information

Date Investment First Submitted: 2009-06-30
Date of Last Change to Activities: 2012-06-21
Investment Auto Submission Date: 2012-02-27
Date of Last Investment Detail Update: 2011-09-16
Date of Last Exhibit 300A Update: 2012-02-27

Date of Last Revision: 2012-07-17

Agency: 029 - Department of Veterans Affairs Bureau: 00 - Agency-Wide Activity

Investment Part Code: 01

Investment Category: 00 - Agency Investments

1. Name of this Investment: Medical 21st Century MyHealtheVet

2. Unique Investment Identifier (UII): 029-55555242

Section B: Investment Detail

1. Provide a brief summary of the investment, including a brief description of the related benefit to the mission delivery and management support areas, and the primary beneficiary(ies) of the investment. Include an explanation of any dependencies between this investment and other investments.

My HealtheVet (MHV) is a forward-facing web portal that helps replace a visit-based, hospital-centric model with a Veteran-centric health care model and infrastructure designed to help Veterans navigate the VA health care system and receive coordinated care, thus enhancing the Veteran's overall healthcare experience in an environment that is results-driven and innovative. Benefits to the Veterans include that they are able to use MHV to view their Personal Health Record (PHR), extracts from their VA health record, securely communicate electronically with their health care team and access educational material. MHV is the unifying step towards giving Veterans complete ownership of their health care and is vital to the accomplishment of seven of Secretary Shinseki's major transformation initiatives and aligns with VA's Strategic Plan. By 2013, MHV will provide enhanced Blue Button capability that allows Veterans to download their personal health information, interactive courses, and advanced information access and communication tools (e.g., mobile devices, social networks, chat, etc.) all to enhance chronic care management and patient self-management. Efforts are underway to cultivate the use of Secure Messaging (SM) by every Primary Care clinician and expand its use to clinical subspecialties and non-clinical users. An e-Health Quality Enhancement Research Initiative (QUERI) Center will report out on its findings for evaluating implementation and clinical impact of SM and other MHV applications, and execute on its findings. MHV provides cultural change, better business

processes, improved clinical workflow, and innovative initiatives that will dramatically improve quality and access to healthcare for our Nation's heroes and their families, and provide a venue for better collaboration with non-enrolled Veterans. Strategies: Use resident expertise and enlist multidisciplinary experts to improve current tools and materials for clinical adoption Align with Patient Aligned Care Teams to embed MHV/SM into other collaborative activities Align with activities focused on patient-oriented services, health libraries, modern communication and self-managed tools Develop creative methods to disseminate SM knowledge via tutorials and training designed to provide hands-on experience as well as provide links to other VA Initiatives Leverage MHV and SM Coordinator staff at regional and facility levels to identify experts and enforce accountability.

2. How does this investment close in part or in whole any identified performance gap in support of the mission delivery and management support areas? Include an assessment of the program impact if this investment isn't fully funded.

My HealtheVet (MHV), VA's Personal Health Record (PHR) has become a window to better health for each individual Veteran and for the non-enrolled Veterans in the country at large. Putting health data in the hands and under the control of our Veterans creates the opportunity to enrich, explain, and leverage our information to better their health. MHV empowers Veterans to have easy access to their data, and to share that information as they choose, with those whom they trust. VA's inability to provide Veterans and external providers easy access to important health history was frustrating, dangerous and a significant problem. As multiple war related issues surfaced, the need for care coordination became even greater. VA developed My HealtheVet's Blue Button, which allows Veterans the ability to print, download, view, or save self-entered and VA personal health information, in collaboration with the Centers for Medicare and Medicaid Services (CMS), and the Department of Defense (DoD), along with the Markle Foundation's Consumer Engagement Workgroup. MHV provided the most basic level for Veterans to access and share important data and information anywhere Internet access is available, 24x7. Using MHV can lead to better care coordination, use of time and increased satisfaction with health care services. MHV's Blue Button supports the use of industry innovation and ease of data exchange. MHV recognizes the value of emerging technology standards and is committed to continue to seek industry feedback on standards and file formats as well as content to enhance the value of electronic data to consumers. One of the drivers was based on the idea of increasing consumer access to data. There's a direct benefit to Veterans to have easy access to their data available through MHV. Provides access to personalized VA Wellness Reminders, VA Appointments, VA Allergies and Adverse Reactions, and VA Chemistry/Hematology Test Results. Introduced the VA Blue Button to download, print or save personal health information through My HealtheVet. Integrated Secure Messaging nationally throughout VA's primary care practice. Announced My HealtheVet Blue Button launch at the Disabled American Veterans National Convention and during the State of the Union speech by the President. More than 250,000 VA patients downloaded their information in the five months following the button's launch.

3. Provide a list of this investment's accomplishments in the prior year (PY), including projects or useful components/project segments completed, new functionality added, or operational efficiency achieved.

Provided access to personalized VA Wellness Reminders, Appointments, Allergies and Adverse Reactions, and Chemistry/Hematology Test Results. Introduced the VA Blue Button

to download, print or save personal health information through My HealtheVet. Integrated Secure Messaging nationally throughout VA's primary care practice. Announced My HealtheVet Blue Button launch at the Disabled American Veterans National Convention and during the State of the Union speech by the President. VA trademarks' Blue Button. The private sector adopts "Blue Button" (i.e., Aetna will deliver to its 10 million members) MicroSoft HealthVault integrates VA's Blue Button. CMS and DoD adopt and align with VA's Blue Button. Implemented Secure Messaging Reporting. Worked through planning stages and acquisition for Health Risk Assessment. Provided access to the Veterans Health Library.

4. Provide a list of planned accomplishments for current year (CY) and budget year (BY).

Current Year Accomplishments: Introduced Personal Health Record components of Wellness Reminders, Allergies, Appointments and Lab Chemistry/Hematology. Completed Planning Phase of Health Risk Assessment and Virtual Health Library. Provided additional Blue Button functionality to include PDF and the ability to customize download by date range and information type. Completed Secure Messaging Reporting and Enhancements to improve utilization of Secure Messaging Expanded the use of Secure Message in Primary Care to include 100% of VA facilities. Budget Year Accomplishments: Provide Secure Messaging to Specialty Care. Preventative Care: Health Risk Assessment - first increment - Standalone version that patient can complete. Continued work on the integration of the Veterans Health Library which provides a consitent, comprehensive source of health education and information to Veterans and their family members. Continued development of Mental Health's My Recovery Plan including My Goals module and integration with My HealtheVet. Development of patient oriented web-based educational objects to support Evidenced-Based Therapy (EBT) contingent on the full development of My Recovery Plan. Promotion of Resilience and Prevention development, contigent on the full development of My Recovery Plan. Improved Authentication capability. Alignment with Department of Defenses TriCare Online for additional health summary extracts. Additional Joint VA/DOD mental health courses. Development of a Comprehensive Care Document which incorporates the remaining twelve extracts from Vista and provides for Blue Button download as part of the health summary. Continued development and integration with the Patient Education Management System in conjunction with Department of Defense. Integration with Decision Support Logon Single Sign-On which will allow users to receive a DS Logon account and then travel to other federal websites without signing on again. Continued work on Capabilities Enhancement initiative which will strengthen and update the existing architecture to allow for continued growth and integration with partners.

5. Provide the date of the Charter establishing the required Integrated Program Team (IPT) for this investment. An IPT must always include, but is not limited to: a qualified fully-dedicated IT program manager, a contract specialist, an information technology specialist, a security specialist and a business process owner before OMB will approve this program investment budget. IT Program Manager, Business Process Owner and Contract Specialist must be Government Employees.

2009-06-10

Section C: Summary of Funding (Budget Authority for Capital Assets)

1.

Table I.C.1 Summary of Funding										
	PY-1 & Prior	PY 2011	CY 2012	BY 2013						
Planning Costs:	\$0.0	\$0.0	\$0.0	\$0.0						
DME (Excluding Planning) Costs:	\$13.8	\$19.4	\$16.0	\$11.3						
DME (Including Planning) Govt. FTEs:	\$1.7	\$1.8	\$0.5	\$1.7						
Sub-Total DME (Including Govt. FTE):	\$15.5	\$21.2	\$16.5	\$13.0						
O & M Costs:	\$0.0	\$0.8	\$6.8	\$0.5						
O & M Govt. FTEs:	\$0.0	\$0.1	\$1.2	\$0.1						
Sub-Total O & M Costs (Including Govt. FTE):	0	\$0.9	\$8.0	\$0.6						
Total Cost (Including Govt. FTE):	\$15.5	\$22.1	\$24.5	\$13.6						
Total Govt. FTE costs:	\$1.7	\$1.9	\$1.7	\$1.8						
# of FTE rep by costs:	13	15	15	15						
Total change from prior year final President's Budget (\$)		\$4.3	\$4.7							
Total change from prior year final President's Budget (%)		23.84%	23.45%							

2. If the funding levels have changed from the FY 2012 President's Budget request for PY or CY, briefly explain those changes:

Section D: Acquisition/Contract Strategy (All Capital Assets)

	Table I.D.1 Contracts and Acquisition Strategy										
Contract Type	EVM Required	Contracting Agency ID	Procurement Instrument Identifier (PIID)	Indefinite Delivery Vehicle (IDV) Reference ID	IDV Agency ID	Solicitation ID	Ultimate Contract Value (\$M)	Туре	PBSA ?	Effective Date	Actual or Expected End Date
Awarded	3600	<u>VA11810F002</u> <u>6</u>	GS06F0508Z	4730							
Awarded	3600	VA11811F001 1	GS06F0543Z	4730							
Awarded	3600	<u>VA11811P003</u> <u>9</u>									
Awarded	3600	VA11811F012 <u>8</u>	NNG07DA47B	8000							
Awarded	3600	<u>VA11810P009</u> <u>1</u>									
Awarded	3600	VA798P0013									

2. If earned value is not required or will not be a contract requirement for any of the contracts or task orders above, explain why: Earned Value Management is required on all My HealtheVet contract actions. Several of the My HealtheVet contracts are Firm Fixed Price and therefore would require less EVM. PMAS requires us to review Earned Value Management.

Page 6 / 12 of Section 300 Date of Last Revision: 2012-07-17 Exhibit 300 (2011)

Exhibit 300B: Performance Measurement Report

Section A: General Information

Date of Last Change to Activities: 2012-06-21

Section B: Project Execution Data

	Table II.B.1 Projects											
Project ID	Project Name	Project Description	Project Start Date	Project Completion Date	Project Lifecycle Cost (\$M)							
1010050603	My HealtheVet - Secure Messaging	Secure Messaging seeks to allow the functionality for Veterans to securely communicate with the Healthcare teams for all non-emergent and non-urgent issues. This project has the potential to increase patient satisfaction and contribute to positive patient outcomes. The use of Secure Messaging has been mandated at all VAMCs and has been incorporated into facility performance standards. We must continue to improve the application to meet the needs of our Veterans and their Healthcare teams.										
1011050604	Health Risk Assessment (HRA)	A VA-customized health risk assessment (HRA) will provide population-level data at facility, vISN, and national levels for preventive care and disease management monitoring. The system, located in its own environment will interface with MHV & CPRS.										

		Table II.B.	1 Projects		
Project ID	Project Name	Project Description	Project Start Date	Project Completion Date	Project Lifecycle Cost (\$M)
1101100603	My Recovery Plan (MRP)	MyRecovery Planseeks to improve delivery of web based tools and access for veterans who are substance abuse recovering and mental health patients. It includes enhancement of the existing Goals module continued development of new features in the overall evaluation, and development of an appropriate electronic recovery treatment plan for mental health and recovering substance abusing patients as a part of a larger comprehensive treatment solution.			
1109130682	My HealtheVet and eBenefits Portal Integration	The Veterans/Consumers Health Informatics Office (V/CHIO) together with the Chief Business Office (CBO) and eBenefits request the provision of Single Sign On (SSO) capability for My HealtheVet (MHV). The SSO functionality should allow users to sign-on to the MHV portal from another authentication enabled portal as well as from the MHV portal to another eAuthentication enabled portal. This request is beneficial for Veterans who must maintain multiple usernames and passwords in order to conduct online business with the Department of Veterans Affairs (VA). This can be frustrating on the part of the Veteran who must remember which password is used for which web site.			
1011010605	My HealtheVet Capabilities Enhancement	My HealtheVet Capabilities Enhancement is designed to allow for the upgrade of all hardware and software which constitutes the infrastructure for			

Table II.B.1 Projects										
Project ID	Project Name	Project Description	Project Start Date	Project Completion Date	Project Lifecycle Cost (\$M)					
		the My HealtheVet application. Phase one includes transition to virtual environments at the AITC as well as the addition of automated testing. The build environment crashed for MHV because of the antiquated hardware. My HealtheVet is currently running on non-supported versions of software. In order to continue to support the many dependent applications we need to create a more robust and flexible system.								
1011010606	My HealtheVet- Online Viewing PHR	The goal of the My HealtheVet (MHV) Program is to create improved quality of care for Veterans by empowering then to make informed healthcare decisions. MHV does this by providing veterans a mechanism to create and maintain a portable personal medical record accessible via the internet. Authenticated veterans can access their Vista records through this Personal Health Record. Currently VA patients who are registered MHV users, that have completed the IPA process, can view select portions of their Veterans Administration electronic health records data online, however, there are still several extracts that are unavailable and this limits their ability to actively participate and help manage their care.								

Activity Summary

Roll-up of Information Provided in Lowest Level Child Activities

Activity Summary

Roll-up of Information Provided in Lowest Level Child Activities

Project ID	Name	Total Cost of Project Activities (\$M)	End Point Schedule Variance (in days)	End Point Schedule Variance (%)	Cost Variance (\$M)	Cost Variance (%)	Total Planned Cost (\$M)	Count of Activities
Project ID	Name	Total Cost of Project Activities (\$M)	End Point Schedule Variance (in days)	End Point Schedule Variance (%)	Cost Variance (\$M)	Cost Variance (%)	Total Planned Cost (\$M)	Count of Activities
1010050603	My HealtheVet - Secure Messaging							
1011050604	Health Risk Assessment (HRA)							
1101100603	My Recovery Plan (MRP)							
1109130682	My HealtheVet and eBenefits Portal							

Integration

My HealtheVet Capabilities

Enhancement

My HealtheVet-Online Viewing PHR

1011010605

1011010606

Key Deliverables										
Project Name	Activity Name	Description	Planned Completion Date	Projected Completion Date	Actual Completion Date	Duration (in days)	Schedule Variance (in days)	Schedule Variance (%)		

NONE

Page 10 / 12 of Section300 Date of Last Revision: 2012-07-17 Exhibit 300 (2011)

Section C: Operational Data

Metric Description Unit of	M	A Performance	Measurement					
	Cate	leasurement egory Mapping	Condition	Baseline	Target for PY	Actual for PY	Target for CY	Reporting Frequency
Mesurement of Perconumber of monthly visits to the MHV site.	-	Technology - Effectiveness	Over target	0.000000	0.000000	0.000000	20.000000	Monthly
ASCI Survey percomeasures customer satisfaction. My HealtheVet Index to meet or exceed Federal Government Index	0	stomer Results - ervice Quality	Over target	73.300000	75.000000	75.000000	75.000000	Semi-Annual
Deliver at least 2 nu customer approved releases (feature/functions)	- Ma	ess and Activities anagement and Innovation	Over target	0.000000	0.000000	0.000000	2.000000	Quarterly
Availability: Measured perc as actual System uptime divided by the total scheduled uptime.	R	Technology - Reliability and Availability	Over target	95.000000	0.00000	0.00000	95.000000	Semi-Annual
PC1 Program percispecific measure for client/customer satisfaction:: Develops and maintains an effective performance evaluation program to measure and monitor customer satisfaction. Obtains customer and stakeholder feedback and incorporates this feedback in planning and providing products and services.	•	stomer Results - ervice Quality	Over target	0.000000	0.00000	0.00000	0.000000	Quarterly
Population Health nu	umber Proce	ess and Activities	Over target	473000.000000	0.000000	0.000000	567600.000000	Semi-Annual

Table II.C.1 Performance Metrics											
Metric Description	Unit of Measure	FEA Performance Measurement Category Mapping	Measurement Condition	Baseline	Target for PY	Actual for PY	Target for CY	Reporting Frequency			
Management and Consumer Safety: Provide Veterans with online access of Personal Health Record.		- Productivity									